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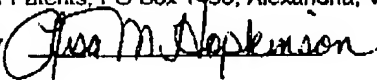
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Date: 2-Feb-07

To: Examiner: Anand B. Patel
Art Unit: 2116
Fax Number: (571) 273-8300

From: Michael R. Barre
Fax: Number: (480) 715-7738

Applicant(s): Michael A. Rothman
Application No.: 10/775,863
Docket No.: P18513
Filed: 02/09/04
Title: METHOD AND APPARATUS FOR
ENABLING PLATFORM CONFIGURATION

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Lisa M. Hopkinson Date: 2/2/07 

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Fax Cover Sheet (1 page)
Transmittal Form (1 page)
Petition for Extension of Time (1 page submitted in duplicate)
RESPONSE / AMENDMENT AFTER FINAL (6 pages)

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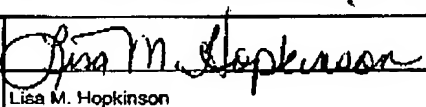
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|---|----------------------|------------------------|--------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/775,863 | |
| | Filing Date | 02/09/04 | |
| | First Named Inventor | Michael A. Rohman | |
| | Art Unit | 2116 | |
| | Examiner Name | Anand B. Patel | |
| Total Number of Pages in This Submission | 10 | Attorney Docket Number | P18513 |

| ENCLOSURES (Check all that apply) | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|----------------------|----------|--------|
| Firm Name | Intel Corporation | | |
| Signature | / Michael R. Barré / | | |
| Printed name | Michael R. Barré | | |
| Date | February 2, 2007 | Reg. No. | 44,023 |

| CERTIFICATE OF TRANSMISSION/MAILING | |
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| Signature |  |
| Typed or printed name | Lisa M. Hopkinson |
| Date | February 2, 2007 |

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